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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
WESTERN DISTRICT OF PENNSYLVANIA	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1: Identify Yourself						
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):			
1.	Your full name						
	Write the name that is on your government-issued picture identification (for	Jeffrey First name	_	Kerry First name			
	example, your driver's license or passport).	Middle name	-	Middle name			
	Bring your picture identification to your meeting with the trustee.	Lowicki Last name and Suffix (Sr., Jr., II, III)	-	Last name and Suffix (Sr., Jr., II, III)			
2.	All other names you have used in the last 8 years						
	Include your married or maiden names.						
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4838		xxx-xx-7922			

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Debtor 1 Jeffrey Lowicki
Debtor 2 Kerry Lowicki Case number (if known)

		About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		I have not used any business name or EINs. Business name(s) EINs	■ I have not used any business name or EINs. Business name(s) EINs		
5.	Where you live	243 Camfield Street	If Debtor 2 lives at a different address:		
		Pittsburgh, PA 15210 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Allegheny	County		
		County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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DCD	otor 2	Jeffrey Lowicki Kerry Lowicki					Case number (if known)	
Part	t 2:	Tell the Court About Y	our Bank	ruptcy C	ase			
7.	Bank	e chapter of the nkruptcy Code you are				each, see <i>Notice Required b</i> age 1 and check the appropri	y 11 U.S.C. § 342(b) for Individuals Filin ate box.	g for Bankruptcy
	choo	sing to file under	☐ Chapt	ter 7				
			☐ Chapt	ter 11				
			☐ Chapt	ter 12				
			■ Chap	ter 13				
8.	How	you will pay the fee	abo ord a p	out how your ler. If your re-printed eed to pa	ou may pay. Typica rattorney is submit I address. y the fee in install	ally, if you are paying the feeting your payment on your bements. If you choose this op	eck with the clerk's office in your local co yourself, you may pay with cash, cashie shalf, your attorney may pay with a credi tion, sign and attach the <i>Application for</i>	r's check, or money t card or check with
			☐ I re	equest the is not recolles to yo	at my fee be waive quired to, waive you our family size and y	ur fee, and may do so only if you are unable to pay the fee	ion only if you are filing for Chapter 7. By your income is less than 150% of the off in installments). If you choose this optic fficial Form 103B) and file it with your pe	icial poverty line that on, you must fill out
9.		lave you filed for ankruptcy within the ast 8 years?	■ No.					
			☐ Yes.					
		•		District		When	Case number	
				District		When	Case number	
				District		When	Case number	
10.		any bankruptcy	■ No					
	filed not fi you,	s pending or being by a spouse who is iling this case with or by a business ner, or by an ate?	☐ Yes.					
				Debtor			Relationship to you	
				District		When	Case number, if known	
				Debtor			Relationship to you	
				District		When	Case number, if known	
11.		ou rent your lence?	■ No.	Go to	line 12.			
	resiu		☐ Yes.	Has y	our landlord obtaine	ed an eviction judgment agair	nst you?	
					No. Go to line 12.			
					Yes. Fill out <i>Initia</i> this bankruptcy p		n Judgment Against You (Form 101A) ar	nd file it as part of

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Deb	tor 1 tor 2	Jeffrey Lowicki Kerry Lowicki				Case number (if known)
Part	3:	Report About Any Bu	sinesses	You Own	as a Sole Proprie	tor
12. Are you a sole proprietor of any full- or part-time business?			■ No.	Go to	Part 4.	
			☐ Yes.	Name	and location of bus	iness
A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.						
	If you sole p	have more than one proprietorship, use a		Numb	er, Street, City, Star	te & ZIP Code
separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C.			•			
				☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))		
					`	efined in 11 U.S.C. § 101(53A))
					-	er (as defined in 11 U.S.C. § 101(6))
					None of the above	
13.	Chap Bank	ou filing under ter 11 of the ruptcy Code and are a small business or?	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).			
		definition of small	■ No.	I am n	ot filing under Chap	oter 11.
		ess debtor, see 11 . § 101(51D).	□ No.	I am fi Code.	ing under Chapter	11, but I am NOT a small business debtor according to the definition in the Bankruptcy
			☐ Yes.	I am fi	ing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Part	4:	Report if You Own or	Have Any	Hazardo	us Property or An	y Property That Needs Immediate Attention
14.		ou own or have any erty that poses or is	■ No.			
	alleg	ed to pose a threat	☐ Yes.			
		minent and ifiable hazard to		What is t	he hazard?	
	public health or safety? Or do you own any					
proper		erty that needs ediate attention?			ate attention is why is it needed?	
	perisi livest or a b	xample, do you own nable goods, or ock that must be fed, puilding that needs tt repairs?		Where is	the property?	
						Number, Street, City, State & Zip Code

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Debtor 1 Jeffrey Lowicki

Debtor 2 Kerry Lowicki Case number (if known)

Part 5: Explain Your

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

□ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 18-24273-CMB Doc 1 Filed 11/01/18 Entered 11/01/18 11:37:15 Desc Main Document Page 6 of 56

		/ Lowicki Lowicki			· ·	Case nu	ımber (if known)			
Part			ions for Rep	orting Purposes						
	What kind of you have?		16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."							
				No. Go to line 16b.						
				Yes. Go to line 17.						
				Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.						
				No. Go to line 16c.						
				Yes. Go to line 17.						
			16c. S	tate the type of debts you owe th	at are not consur	ner debts or bus	siness debts			
17.	Are you filing Chapter 7?	under	■ No.	am not filing under Chapter 7. Go	o to line 18.					
	Do you estim after any exe property is ex	mpt		I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?						
	administrativ	administrative expenses are paid that funds will be available for distribution to unsecured] No						
	be available f] Yes						
18.		low many Creditors do	1 -49		1 ,000-5,000		2 5,001-50,0			
	you estimate owe?	that you	□ 50-99 □ 100-199 □ 200-999		□ 5001-10,000 □ 10,001-25,000		☐ 50,001-100, ☐ More than 10			
19.		ow much do you stimate your assets to e worth?	□ \$0 - \$50 ₁		\$1,000,001		\$500,000,00			
	be worth?		□ \$50,001 - \$100,000 ■ \$100,001 - \$500,000 □ \$500,001 - \$1 million		☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million		□ \$10,000,000	001 - \$10 billion 0,001 - \$50 billion 350 billion		
20.	How much do estimate you		□ \$0 - \$50,		□ \$1,000,001 - □ \$10,000,001		□ \$500,000,00 □ \$1,000,000			
	to be?		■ \$50,001 - \$100,000 □ \$100,001 - \$500,000		□ \$50,000,001 - \$100 million		<u>—</u>	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion		
			\$500,00	1 - \$1 million	\$100,000,00	1 - \$500 million	☐ More than S	\$50 billion		
Part	37: Sign Bel	ow								
For	you		I have exam	nined this petition, and I declare u	under penalty of p	erjury that the ir	nformation provided is tru	e and correct.		
				osen to file under Chapter 7, I ames Code. I understand the relief a						
				ey represents me and I did not pa have obtained and read the noti				me fill out this		
			I request rel	lief in accordance with the chapte	er of title 11, Unite	ed States Code,	specified in this petition.			
			I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.							
			/s/ Jeffrey			/s/ Kerry Lovie				
			Jeffrey Lo Signature of			Kerry Lowic Signature of De				
			Executed or	November 1, 2018 MM / DD / YYYY		Executed on	November 1, 2018 MM / DD / YYYY			

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Debtor 1 Debtor 2	Jeffrey Lowicki Kerry Lowicki	_	Case	e number (if known)
	attorney, if you are ted by one	under Chapter 7, 11, 12, or 13 of title 11, United	ed States Code, and have e	informed the debtor(s) about eligibility to proceed xplained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)
	not represented by ey, you do not need s page.			ledge after an inquiry that the information in the
		/s/ Paul W. McElrath, Jr.	Date	November 1, 2018
		Signature of Attorney for Debtor		MM / DD / YYYY
		Paul W. McElrath, Jr. Printed name McElrath Legal Holdings, LLC Firm name		
		1641 Saw Mill Run Blvd.		
		Pittsburgh, PA 15210 Number, Street, City, State & ZIP Code		
		Contact phone 412-765-3606	Email address	ecf@mcelrathlaw.com
		86220 PA		
		Bar number & State		

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Fill in this infor	mation to identify your	case:	·	
Debtor 1	Jeffrey Lowicki			
	First Name	Middle Name	Last Name	
Debtor 2	Kerry Lowicki			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT O	OF PENNSYLVANIA	
Case number				
(if known)				☐ Chec

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your as Value o	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	84,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	38,707.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	122,707.00
Pai	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	80,714.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	11,216.00
	Your total liabilities	\$	91,930.00
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	6,487.66
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,450.00
Paı	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	nedules.
	■ Yes What kind of debt do you have?		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- ☐ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Jebtor 2	Kerry Lowicki	Case number (if known)	
	om the Statement of Your Current Monthly Income: Copy your tota 2A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	current monthly income from Official Form	\$ 7,448.32

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Debtor 1 Jeffrey Lowicki

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	10,091.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	10,091.00

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		200 2	Doc	ument	Page 10 of 56	_,		2000
Fill in this inform	ation to identify	your case and th	is filing	j:				
Debtor 1	Jeffrey Lowi							
Debtor 2	First Name		Name		Last Name			
(Spouse, if filing)	Kerry Lowic		Name		Last Name			
United States Ban	kruptcy Court for	the: WESTERN	DISTR	ICT OF PEN	INSYLVANIA			
Case number								☐ Check if this is a
]	amended filing
Official For	m 106A/B							
Schedule	_	-						12/15
			an asset	only once. If	f an asset fits in more than one	e category, li	st the asset in	
answer every quest	ion.	·			he top of any additional pages Own or Have an Interest In	, , .		
. Do you own or ha	ave any legal or eq	uitable interest in a	ny resid	ence, buildin	g, land, or similar property?			
☐ No. Go to Part	2.							
Yes. Where is	the property?							
1.1			What	is the proper	ty? Check all that apply			
243 Camfie	available, or other des	cription		Single-family				ims or exemptions. Put d claims on <i>Schedule D:</i>
0001 4.54.000,	aranasis, e. e. 10. dec			•	ulti-unit building m or cooperative			ns Secured by Property.
				Manufacture	ed or mobile home	Current v	alue of the	Current value of the
Pittsburgh	PA	15210-0000		Land		entire pro	perty?	portion you own?
City	State	ZIP Code		Investment p	property	\$	84,000.00	\$84,000.0
				Other			•	our ownership interest ancy by the entireties, o
					st in the property? Check one		te), if known.	
Allegheny				Debtor 1 onl Debtor 2 onl	•	Fee sim	pie	
County					y d Debtor 2 only			
					of the debtors and another		k if this is com structions)	munity property
					you wish to add about this ite	m, such as lo	ocal	
				idence Market Va	lue Determined By Com	nparable S	ales	
۲۰ ۸ ماما ۱۹۵۵ مامال	* value of the	rtion voi: own fo	r oll of		from Bort 1 including	ontrice for		
					from Part 1, including any			\$84,000.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

page 1 Official Form 106A/B Schedule A/B: Property

Part 2: Describe Your Vehicles

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Debt Debt		Jeffrey Lowicki Kerry Lowicki		Case number (if known)	
3. C a	ars, vans	s, trucks, tractors, sport utility ve	hicles, motorcycles		
	No				
	Yes				
3.1	Other in	Ford Taurus 2005 imate mileage: 155,000 nformation: ion: 243 Camfield Street,	Who has an interest in the property? Check one ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	the amount of any see	portion you own?
	Pittsb	ourgh PA 15210	☐ Check if this is community property (see instructions)	Ψ4,120.0	Ψ+,120.00
3.2	Model: Year: Approx Other in	Ford Focus 2011 imate mileage: 100,000 nformation: ion: 243 Camfield Street,	Who has an interest in the property? Check one ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	the amount of any se	d claims or exemptions. Put cured claims on Schedule D: Claims Secured by Property. Current value of the portion you own?
		ourgh PA 15210	Check if this is community property (see instructions)	\$6,750.0	\$6,750.00
			rn for all of your entries from Part 2, including a		\$10,875.00
Part :	3: Desci	ribe Your Personal and Household It	ems		
			terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
E	xamples No	d goods and furnishings : Major appliances, furniture, linens escribe	, china, kitchenware		
		Summary Avail	nold Goods & Furnishings able Upon Request amfield Street, Pittsburgh PA 15210		\$3,000.00
E	ectronic xamples		eo, stereo, and digital equipment; computers, print nedia players, games	ters, scanners; music colle	ections; electronic devices
		escribe			
E	xamples No	other collections, memorabilia, co	prints, or other artwork; books, pictures, or other a llectibles	art objects; stamp, coin, or	baseball card collections;
	Yes. D	escribe			

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Debto Debto	•		vn)
Ex	uipment for sports amples: Sports, pho musical inst No Yes. Describe	tographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canor	es and kayaks; carpentry tools;
	No	es, shotguns, ammunition, and related equipment	
	Yes. Describe	Miscellaneous Firearms	
		Location: 243 Camfield Street, Pittsburgh PA 15210	\$2,700.00
	lothes Examples: Everyday o No Yes. Describe	clothes, furs, leather coats, designer wear, shoes, accessories	
		Clothing Location: 243 Camfield Street, Pittsburgh PA 15210	\$600.00
	ewelry Examples: Everyday j No Yes. Describe	ewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gem Jewelry Location: 243 Camfield Street, Pittsburgh PA 15210	s, gold, silver
	on-farm animals Examples: Dogs, cats No Yes. Describe	, birds, horses	
		2 Dogs Location: 243 Camfield Street, Pittsburgh PA 15210	\$0.00
	n y other personal a No Yes. Give specific ir	nd household items you did not already list, including any health aids you did not list	
		e of all of your entries from Part 3, including any entries for pages you have attached t number here	\$6,800.00
Part 4			
Do yo	ou own or have any	legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
		u have in your wallet, in your home, in a safe deposit box, and on hand when you file your pe	etition

Official Form 106A/B Schedule A/B: Property page 3

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	ebtor 1 ebtor 2	Jeffrey Low Kerry Low			Case number (if known)	
					Cash	\$32.00
17.			savings, or other financial acco s. If you have multiple accounts		nares in credit unions, brokerage hou ach.	uses, and other similar
	_			Institution name:		
			17.1. Checking	FNB		\$2,000.00
18.	Examp No		s, or publicly traded stocks ls, investment accounts with bro	,	ccounts	
40						
19.	joint ve		Stock and interests in incorp	orated and unincorporated b	usinesses, including an interest i	n an LLC, partnersnip, and
	☐ Yes.	Give specific i	nformation about them Name of entity:		% of ownership:	
20.	Negotia	able instrumer	rporate bonds and other negonals include personal checks, case are those you cannot train the same that the same t	shiers' checks, promissory note	s, and money orders.	
		Give specific in	nformation about them Issuer name:			
21.		nent or pension bles: Interests i		403(b), thrift savings accounts,	or other pension or profit-sharing pla	ans
	Yes. I	List each acco	unt separately. Type of account:	Institution name:		
			401 (k)	Giant Eagle		\$19,000.00
22.	Your sh	hare of all unu	nd prepayments sed deposits you have made so nts with landlords, prepaid rent,		e or use from a company ater), telecommunications companie	s, or others
				Institution name or indiv	ridual:	
23.	Annuiti No	i es (A contract	for a periodic payment of mone	ey to you, either for life or for a	number of years)	
	☐ Yes		Issuer name and description.			
24.			tion IRA, in an account in a q), 529A(b), and 529(b)(1).	ualified ABLE program, or ur	nder a qualified state tuition progr	am.
	☐ Yes		Institution name and description	n. Separately file the records of	any interests.11 U.S.C. § 521(c):	
25.	Trusts, ■ No	equitable or	future interests in property (c	other than anything listed in li	ine 1), and rights or powers exerc	isable for your benefit
	☐ Yes.	Give specific i	nformation about them			
26.			trademarks, trade secrets, ar omain names, websites, procee			
	_	Give specific i	nformation about them			

Official Form 106A/B Schedule A/B: Property page 4

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		Document	2age 14 01 5	0	
Debtor 1 Debtor 2	Jeffrey Lowicki Kerry Lowicki			Case number (if known)	
Exan ■ No	uses, franchises, and other general in sees, Building permits, exclusive licenses. Give specific information about them	ses, cooperative association	holdings, liquor lic	enses, professional licens	es
Money o	r property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
■ No	efunds owed to you				
⊔ Yes	s. Give specific information about them,	, including whether you alrea	dy filed the returns	and the tax years	
Exan ■ No	ly support nples: Past due or lump sum alimony, s s. Give specific information	spousal support, child suppor	t, maintenance, di	vorce settlement, property	settlement
	r amounts someone owes you nples: Unpaid wages, disability insuran benefits; unpaid loans you made		fits, sick pay, vaca	tion pay, workers' compe	nsation, Social Security
	s. Give specific information				
	ests in insurance policies nples: Health, disability, or life insuranc	e; health savings account (H	SA); credit, homed	owner's, or renter's insura	nce
■ Yes	s. Name the insurance company of eac Company nam		Benefi	ciary:	Surrender or refund value:
	Term Life In:	surance Through emplo	yer Wife		\$0.00
If you some	nterest in property that is due you fr u are the beneficiary of a living trust, ex cone has died. S. Give specific information			re currently entitled to rec	eive property because
	ns against third parties, whether or nangles: Accidents, employment disputes			nd for payment	
	s. Describe each claim				
34. Other ■ No	contingent and unliquidated claims	of every nature, including	counterclaims of	the debtor and rights to	set off claims
☐ Yes	s. Describe each claim				
35. Any f ■ No	inancial assets you did not already l	ist			
	s. Give specific information				
	the dollar value of all of your entrie Part 4. Write that number here				\$21,032.00
					. —

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

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		Docun	ient	Page 15 01	50	
Debi		Jeffrey Lowicki Kerry Lowicki			Case number (if known)	
37. D	o vou c	own or have any legal or equitable interest in any busine	ss-related	property?		
_	-	to Part 6.				
	Yes. G	So to line 38.				
Part		scribe Any Farm- and Commercial Fishing-Related Prope ou own or have an interest in farmland, list it in Part 1.	erty You C	own or Have an Intere	st In.	
46. [o you	own or have any legal or equitable interest in an	y farm- o	r commercial fishir	ng-related property?	
	■ No.	Go to Part 7.				
	☐ Yes.	. Go to line 47.				
Part	7:	Describe All Property You Own or Have an Interest in	Γhat You [Did Not List Above		
•	Examp No	have other property of any kind you did not alreadles: Season tickets, country club membership Give specific information	dy list?			
54.	Add t	he dollar value of all of your entries from Part 7. V	Vrite that	number here		\$0.00
Part	8:	List the Totals of Each Part of this Form				
55.	Part 1	: Total real estate, line 2				\$84,000.00
56.	Part 2	2: Total vehicles, line 5		\$10,875.00		
57.	Part 3	3: Total personal and household items, line 15	_	\$6,800.00		
58.	Part 4	l: Total financial assets, line 36	_	\$21,032.00		
59.	Part 5	: Total business-related property, line 45	_	\$0.00		
60.	Part 6	3: Total farm- and fishing-related property, line 52	_	\$0.00		
61.	Part 7	7: Total other property not listed, line 54	+ _	\$0.00		
62.	Total	personal property. Add lines 56 through 61	-	\$38,707.00	Copy personal property total	\$38,707.00
63.	Total	of all property on Schedule A/B. Add line 55 + line	62			\$122,707.00

Official Form 106A/B Schedule A/B: Property page 6

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Fill in this infor	mation to identify your	case:		
Debtor 1	Jeffrey Lowicki			
	First Name	Middle Name	Last Name	
Debtor 2	Kerry Lowicki			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT (OF PENNSYLVANIA	
Case number (if known)				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify the	Property You	Claim as	Exempt
---------	--------------	--------------	----------	--------

1.	which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.										
	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)										
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)									
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.										
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption						
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.							
	243 Camfield Street Pittsburgh, PA 15210 Allegheny County	\$84,000.00		\$3,286.00	11 U.S.C. § 522(d)(1)						
	Residence Fair Market Value Determined By Comparable Sales Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit							
	2005 Ford Taurus 155,000 miles Location: 243 Camfield Street,	\$4,125.00		\$3,775.00	11 U.S.C. § 522(d)(2)						
	Pittsburgh PA 15210 Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit							
	2005 Ford Taurus 155,000 miles	\$4,125.00		\$350.00	11 U.S.C. § 522(d)(5)						
	Location: 243 Camfield Street, Pittsburgh PA 15210 Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit							
	2011 Ford Focus 100,000 miles Location: 243 Camfield Street,	\$6,750.00		\$3,775.00	11 U.S.C. § 522(d)(2)						
	Pittsburgh PA 15210 Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit							
	2011 Ford Focus 100,000 miles Location: 243 Camfield Street.	\$6,750.00		\$2,975.00	11 U.S.C. § 522(d)(5)						
P	Pittsburgh PA 15210 Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit							

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btor 2 Kerry Lowicki			Case number (if known)	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Various Household Goods & Furnishings	\$3,000.00		\$3,000.00	11 U.S.C. § 522(d)(3)
Summary Available Upon Request Location: 243 Camfield Street, Pittsburgh PA 15210 Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
Miscellaneous Firearms Location: 243 Camfield Street,	\$2,700.00		\$2,700.00	11 U.S.C. § 522(d)(5)
Pittsburgh PA 15210 Line from Schedule A/B: 10.1			100% of fair market value, up to any applicable statutory limit	
Clothing Location: 243 Camfield Street,	\$600.00		\$600.00	11 U.S.C. § 522(d)(3)
Pittsburgh PA 15210 Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	
Jewelry Location: 243 Camfield Street,	\$500.00		\$500.00	11 U.S.C. § 522(d)(4)
Pittsburgh PA 15210 Line from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit	
2 Dogs Location: 243 Camfield Street,	\$0.00		\$0.00	11 U.S.C. § 522(d)(3)
Pittsburgh PA 15210 Line from Schedule A/B: 13.1			100% of fair market value, up to any applicable statutory limit	
Cash Line from Schedule A/B: 16.1	\$32.00		\$32.00	11 U.S.C. § 522(d)(5)
			100% of fair market value, up to any applicable statutory limit	
Checking: FNB Line from Schedule A/B: 17.1	\$2,000.00		\$2,000.00	11 U.S.C. § 522(d)(5)
			100% of fair market value, up to any applicable statutory limit	
401 (k): Giant Eagle Line from Schedule A/B: 21.1	\$19,000.00		\$19,000.00	11 U.S.C. § 522(d)(12)
			100% of fair market value, up to any applicable statutory limit	
Term Life Insurance Through employer	\$0.00		\$0.00	11 U.S.C. § 522(d)(7)
Beneficiary: Wife Line from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	
Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every No	3 years after that for ca	ases fi	•	,
☐ Yes. Did you acquire the property cove ☐ No	rea by the exemption wi	itnin 1	∠15 days before you filed this case	(
☐ Yes				

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		Document	Page 18	of 56		
Fill in this information	on to identify you	r case:				
	Jeffrey Lowicki First Name	Middle Name	Last Name			
	Kerry Lowicki					
(Spouse if, filing)	irst Name	Middle Name	Last Name			
United States Bankru	ptcy Court for the:	WESTERN DISTRICT OF PE	NNSYLVANIA			
Case number					_	if this is an led filing
Official Form 1 Schedule D:		Who Have Claims	Secure	d by Property	y	12/15
		f two married people are filing toget out, number the entries, and attach it				
1. Do any creditors have	e claims secured by	your property?				
_ `	-	nis form to the court with your othe	r schedules. Y	ou have nothing else to	report on this form.	
	of the information b	,				
Part 1: List All Se	cured Claims					
<u> </u>	ns. If a creditor has n	nore than one secured claim, list the cr	editor separately	, Column A	Column B	Column C
for each claim. If more t	han one creditor has	a particular claim, list the other credito cal order according to the creditor's nar	rs in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Ditech Finance	cial Llc	Describe the property that secures	the claim:	\$80,714.00	\$84,000.00	\$0.00
Creditor's Name		243 Camfield Street Pittsbu 15210 Allegheny County Residence Fair Market Value Determin Comparable Sales				
332 Minnesot Saint Paul, M		As of the date you file, the claim is apply.	: Check all that			
Number, Street, City,		☐ Contingent☐ Unliquidated				
Who owes the debt?		☐ Disputed Nature of lien. Check all that apply.				
■ Debtor 1 only	Official office.	An agreement you made (such as car loan)		cured		
Debtor 2 only		_				
☐ Debtor 1 and Debtor		☐ Statutory lien (such as tax lien, me	echanic's lien)			
☐ At least one of the de ☐ Check if this claim community debt		☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)	Mortgage			
Date debt was incurred	Opened 05/05 Last Active 9/11/17	Last 4 digits of account num	nber 5969			

\$80,714.00 Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages. \$80,714.00 Write that number here:

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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		Document	Page 19	9 of 56		
Fill in this in	formation to identify your	case:				
Debtor 1	Jeffrey Lowicki					
	First Name	Middle Name	Last Name			
Debtor 2	Kerry Lowicki First Name	Middle Name	LastName			
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States	Bankruptcy Court for the:	WESTERN DISTRICT OF	PENNSYLVANIA	1		
Case number						
(if known)						heck if this is an
					a	mended filing
Official Fo	orm 106E/F					
		ho Have Unsecure	ed Claims			12/15
		e Part 1 for creditors with PRIC		Part 2 for creditors u	vith NONDRIORITY clai	
Schedule D: Cr left. Attach the name and case	editors Who Have Claims Sec	ired Leases (Official Form 1060 ured by Property. If more space e. If you have no information to	e is needed, copy	the Part you need, fi	II it out, number the en	tries in the boxes on the
	editors have priority unsecure					
No. Go		a ciainis against you:				
☐ Yes.	to Part 2.					
	st All of Your NONPRIORIT	Y Unsecured Claims				
	editors have nonpriority unsec					
		art. Submit this form to the court	with your other sch	odulos		
_	a have nothing to report in this p	art. Submit this form to the court	with your other sche	edules.		
Yes.						
unsecured	claim, list the creditor separately	aims in the alphabetical order of for each claim. For each claim list the other creditors in Part 3.If y	isted, identify what t	type of claim it is. Do i	not list claims already inc	luded in Part 1. If more
						Total claim
4.1 Aaro	on Sales & Lease Ow	Last 4 digits of	account number	4518		\$0.00
Nonpr	iority Creditor's Name			Opened 06/11	Loct Activo	
	Cobb Place Blvd Nw	When was the	debt incurred?	Opened 06/11 05/13	Last Active	
	nesaw, GA 30144					-
	er Street City State Zlp Code incurred the debt? Check one.	As of the date y	ou file, the claim	is: Check all that appl	У	
_	ebtor 1 only	☐ Contingent				
■ De	ebtor 2 only	☐ Unliquidated				
	ebtor 1 and Debtor 2 only	☐ Disputed				
	least one of the debtors and and	•	RIORITY unsecure	d claim:		
	neck if this claim is for a comm	□ • · · · ·	S			
debt		☐ Obligations a		ration agreement or o	divorce that you did not	
_	claim subject to offset?	report as priority		andres as today of	ollon debte	
■ No				g plans, and other sir	niiar debts	
☐ Ye	es .	Other. Speci	Notice Only	/		-

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Debtor Debtor	1 Jeffrey Lowicki 2 Kerry Lowicki		Case number (if known)					
4.2	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	2652	\$251.00				
	15000 Capital One Dr Richmond, VA 23238	When was the debt incurred?	Opened 04/18 Last Active 9/28/18					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply					
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated						
	_ ,	•						
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d claim:					
	At least one of the debtors and another	☐ Student loans						
	☐ Check if this claim is for a community debt Is the claim subject to offset?	_	ration agreement or divorce that you did not					
	■ No							
	□ Yes	Other Specify Credit Card	<u> </u>					
4.3	Credit Collection Serv Nonpriority Creditor's Name	Last 4 digits of account number	0192	\$502.00				
	725 Canton St Norwood, MA 02062	When was the debt incurred?	Opened 10/16					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply					
	Debtor 1 only							
	Debtor 2 only							
	☐ Debtor 1 and Debtor 2 only	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans						
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not					
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts					
	Yes	Other. Specify Collection	for Nationwide Insurance					
4.4	Credit One Bank Na	Last 4 digits of account number	5180	\$251.00				
	Nonpriority Creditor's Name Po Box 98875 Las Vegas, NV 89193	When was the debt incurred?	Opened 06/18 Last Active 10/07/18					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply					
	Debtor 1 only	☐ Contingent						
	Debtor 2 only	☐ Unliquidated						
	☐ Debtor 1 and Debtor 2 only	·						
	☐ At least one of the debtors and another	d claim:						
	☐ Check if this claim is for a community	this claim is for a community						
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims						
	No	Debts to pension or profit-sharing						
	Yes	Other. Specify Credit Card	<u> </u>					

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Debtor	2 Kerry Lowicki		Case number (if known)	
4.5	Enhanced Recovery Co L	Last 4 digits of account number	1774	Unknown
	Nonpriority Creditor's Name 8014 Bayberry Rd Jacksonville, FL 32256	When was the debt incurred?	Opened 03/15	
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Collection	or Sprint	
4.6	Enhanced Recovery Co L Nonpriority Creditor's Name	Last 4 digits of account number	1660	Unknown
	8014 Bayberry Rd Jacksonville, FL 32256	When was the debt incurred?	Opened 12/17	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Communic	or Comcast Cable ations	
4.7	Eos Cca Nonpriority Creditor's Name	Last 4 digits of account number	6380	Unknown
	Po Box 981008 Boston, MA 02298	When was the debt incurred?	Opened 03/18	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Collection	or Verizon	

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Debtor Debtor	1 Jeffrey Lowicki 2 Kerry Lowicki		Case number (if know	wn)			
4.8	Kohls/capone	Last 4 digits of account number	5668		\$121.00		
	Nonpriority Creditor's Name N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051	When was the debt incurred?	Opened 04/18 10/13/18	Last Active			
•	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	y			
	☐ Debtor 1 only	☐ Contingent					
	■ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or d	livorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other sim	nilar debts			
	Yes	Other. Specify Charge Acc	count				
4.9	Mohela/dept Of Ed Nonpriority Creditor's Name	Last 4 digits of account number	0001	_	\$10,091.00		
	633 Spirit Drive Chesterfield, MO 63005	When was the debt incurred?	Opened 09/17 9/30/18	Last Active			
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	у			
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	■ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community debt	■ Student loans□ Obligations arising out of a sepa	ration agreement or d	livorce that you did not			
	Is the claim subject to offset?	report as priority claims					
	■ No	Debts to pension or profit-sharin	g plans, and other sim	nilar debts			
	Yes	Other. Specify Student Lo	an				
	Photon Hallings Diamond & Jones						
0	Phelan Hallinan Diamond & Jones LLP. Nonpriority Creditor's Name	Last 4 digits of account number			\$0.00		
	1617 JFK Boulevard, Suite 1400 Philadelphia, PA 19103	When was the debt incurred?					
•	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	у			
	☐ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	■ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	is claim is for a community					
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	· ·	•			
	■ No	nilar debts					
	Yes	Other. Specify Notice Only	1				

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Debtor 1 Jeffrey Lowicki Debtor 2 Kerry Lowicki			Case number (if known)	
4.1	Rcs Mtg	Last 4 digits of account number	4411	\$0.00
	Nonpriority Creditor's Name			<u> </u>
	350 S. Grand Avenue Los Angeles, CA 90071	When was the debt incurred?	Opened 5/02/05 Last Active 2/26/16	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Notice Only	!	
4.1	Sternrecsvcs	Last 4 digits of account number	8438	Unknown
	Nonpriority Creditor's Name 415 N Edgeworth St Suite 210 Greensboro, NC 27401	When was the debt incurred?	Opened 12/04/13	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Unpaid bala	ance on account□	
4.1	Webbnk/fhut	Last 4 digits of account number	5573	\$0.00
	Nonpriority Creditor's Name 6250 Ridgewood Road Saint Cloud, MN 56303	When was the debt incurred?	Opened 9/05/10 Last Active 02/14	
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	•	or or one an anat appry	
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	No	report as priority claims Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Notice Only		

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

Case 18-24273-CMB Doc 1 Filed 11/01/18 Entered 11/01/18 11:37:15 Desc Main Document Page 24 of 56 Debtor 1 Jeffrey Lowicki

Debtor 2 Kerry Lowicki		Case number (if known)						
have more than one creditor for any of the notified for any debts in Parts 1 or 2, do		the additional creditors here. If you do not have additional persons to be						
Name and Address	On which entry in Part 1 or Part 2	On which entry in Part 1 or Part 2 did you list the original creditor?						
Comcast	Line 4.6 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims						
Po Box 3001 Southeastern, PA 19398		■ Part 2: Creditors with Nonpriority Unsecured Claims						
Councidation, 17, 10000	Last 4 digits of account number							
Name and Address	On which entry in Part 1 or Part 2	2 did you list the original creditor?						
Nationwide Insurance	Line 4.3 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims						
1 Nationwide Plaza Columbus, OH 43215		■ Part 2: Creditors with Nonpriority Unsecured Claims						
Columbus, 011 43213	Last 4 digits of account number							
Name and Address	On which entry in Part 1 or Part 2	2 did you list the original creditor?						
Sprint	Line 4.5 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims						
Customer Service P.O. Box 8077		■ Part 2: Creditors with Nonpriority Unsecured Claims						
London, KY 40742								
20114011, 137 427 42	Last 4 digits of account number							
Name and Address	On which entry in Part 1 or Part 2	2 did you list the original creditor?						
Verizon	Line 4.7 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims						
500 Technology Drive Suite 30 Weldon Spring, MO 63304		■ Part 2: Creditors with Nonpriority Unsecured Claims						
	Last 4 digits of account number							

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				-	Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
Total	6f.	Student loans	6f.	\$	Total Claim 10,091.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	1,125.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	11,216.00

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Fill in this infor	mation to identify your	case:		
Debtor 1	Jeffrey Lowicki			
	First Name	Middle Name	Last Name	
Debtor 2	Kerry Lowicki			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT (OF PENNSYLVANIA	
Case number				
(if known)				☐ Check if this is a
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have th , Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.3	Oity		Oldio	211 0000	
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.4	,				
	Name				<u> </u>
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>
2.5	- City		Oldio	211 0000	
	Name				_
	Number	Street			_
	City		State	ZIP Code	

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		Docume	nı Page 26 0)I 50	
Fill in this	information to identify your	case:			
Debtor 1	Jeffrey Lowicki				
Debior 1	First Name	Middle Name	Last Name		
Debtor 2	Kerry Lowicki				
(Spouse if, filin		Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the:	WESTERN DISTRICT (OF PENNSYLVANIA		
Case numb	per				
(if known)					☐ Check if this is an
					amended filing
Official	LEarm 106H				
	Form 106H	_			
Sched	ule H: Your Cod	ebtors			12/15
■ No □ Yes 2. With Arizona	nin the last 8 years, have you a, California, Idaho, Louisiana Go to line 3.	ı lived in a community pr , Nevada, New Mexico, Pu	roperty state or territor lerto Rico, Texas, Wash	ry? (Community propert	
in line Form 1 out Co	2 again as a codebtor only in 106D), Schedule E/F (Official blumn 2. Column 1: Your codebtor	f that person is a guaran Form 106E/F), or Sched	tor or cosigner. Make	sure you have listed the 16G). Use Schedule D,	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill editor to whom you owe the debt
V	Name, Number, Street, City, State and Z	IP Code		Check all schedule	es that apply:
3.1				☐ Schedule D, line	<u>a</u>
	Name			☐ Schedule E/F, I	
				☐ Schedule G, lin	
-					<u> </u>
	Number Street City	State	ZIP Code		
`	Oity	Siale	ZIF Code		
				_	
3.2	Mana			Schedule D, line	
ľ	Name			Schedule E/F, I	
				☐ Schedule G, lin	e
	Number Street			_	
(City	State	ZIP Code		

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Fill	in this information to identify your c	ase:				ı			
	otor 1 Jeffrey Low								
	otor 2 Kerry Lowic	ki							
Uni	ted States Bankruptcy Court for the	: WESTERN DISTRIC	T OF PENNSYLVANI	IA					
	se number own)		-			Check if this is An amend A supplem 13 income	ed filing ent showir	ng postpetition	
0	fficial Form 106I					MM / DD/	YYYY	-	
S	chedule I: Your Inc	ome				WIWI / BB/			12/15
atta	t1: Describe Employment					d case number (if	known). A		
	information.					□ Emp		iling spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed□ Not employed				employed		
	employers.	Occupation	Driver			disable	ed		
	Include part-time, seasonal, or self-employed work.	Employer's name	Giant Eagle						
	Occupation may include student or homemaker, if it applies.	Employer's address	101 Kappa Driv Pittsburgh, PA						
		How long employed t	here? 10 yea	rs					
Par	t 2: Give Details About Mor	nthly Income							
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to r	report for	any	line, write \$0 in the	e space. In	clude your no	n-filing
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	on for all	empl	oyers for that pers	on on the I	ines below. If	you need
						For Debtor 1		ebtor 2 or ling spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	7,534.57	\$	0.00	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	0.00	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	7,534.57	\$	0.00	

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	otor 1 otor 2	Jeffrey Lowicki Kerry Lowicki		Case	number (<i>if known</i>)				
				For	Debtor 1		Debtor 2 of		
	Cop	by line 4 here	4.	\$	7,534.57	\$		0.00	
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	1,825.76	\$		0.00	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$		0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$		0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$		0.00	
	5e.	Insurance	5e.	\$	393.00	\$		0.00	
	5f.	Domestic support obligations	5f.	\$	0.00	\$		0.00	
	5g.	Union dues	5g.	\$	59.15	\$		0.00	
	5h.	Other deductions. Specify:	_ 5h.+	\$	0.00	- \$		0.00	
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	2,277.91	\$		0.00	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	5,256.66	\$		0.00	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$		0.00	
	8b.	Interest and dividends	8b.	\$	0.00	\$		0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$		0.00	
	8d.	Unemployment compensation	8d.	\$	0.00	\$		0.00	
	8e.	Social Security	8e.	\$	0.00	\$	1,23	1.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	_ 8f.	\$	0.00	\$		0.00	
	8g.	Pension or retirement income	8g.	\$	0.00	\$		0.00	
	8h.	Other monthly income. Specify:	_ 8h.+	\$	0.00	- \$		0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	1,2	31.00	
10	Cal	culate monthly income. Add line 7 + line 9.	10. \$		5 256 66 . \$	1 2	31.00 =	¢	6,487.66
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	•	5,256.66 + \$_	1,2	31.00 =	Ψ	0,407.00
11.	Stat Incli othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your ear friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depen				chedule J.		0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rest to that amount on the Summary of Schedules and Statistical Summary of Certain lies					12. \$	ombir	6,487.66 led
13.	Do :	you expect an increase or decrease within the year after you file this form?	?				m	onthly	/ income
		Yes. Explain:							

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	in this informs	diameter interestifence						
	in this informa	ation to identify yo	our case:					
Deb	otor 1	Jeffrey Lowi	cki			Che	ck if this is:	
Deh	otor 2	Korry Lowio	lei.				An amended filing	ving postpetition chapter
	ouse, if filing)	Kerry Lowic	KI				13 expenses as of	
ļ ` ·			WEST	TON DIOTOIOT OF DENING			1414 / DD / \\	
Unit	ted States Bank	ruptcy Court for the	: WESTE	ERN DISTRICT OF PENNS	SYLVANIA		MM / DD / YYYY	
!	se number							
0	fficial Fo	orm 106J						
S	chedule	J: Your	Exper	ises				12/15
Be info nur	as complete ormation. If m mber (if know	and accurate as nore space is ne n). Answer ever	s possible eded, atta ry questio	. If two married people are ch another sheet to this t	e filing together, bo form. On the top of	th are equant	ually responsible fo onal pages, write y	or supplying correct your name and case
Par 1.	t 1: Desci	ribe Your House	hold					
١.	□ No. Go to							
	_	es Debtor 2 live	in a senar	ate household?				
	= 100. 2 00		a copa.					
			st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate Housel	hold of Deb	otor 2.	
2.	Do you hav	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.						☐ Yes
								□ No
								☐ Yes
								□ No □ Yes
								□ No
								☐ Yes
3.		penses include	. =	No				
		f people other t d your depende		Yes				
Est exp	timate your ex	a date after the	our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp				
the		h assistance an		government assistance if cluded it on <i>Schedule I:</i> Y			Your exp	enses
4.	The rental of	or home owners	ship expen	ses for your residence. In	nclude first mortgage			0.00
	payments ar	nd any rent for th	e ground o	r lot.		4.	—	0.00
	If not include	ded in line 4:						
		estate taxes		1- 1		4a.	·	0.00
		erty, homeowner's maintenance re		's insurance ipkeep expenses		4b. 4c.		0.00
		eowner's associat	•			4d.		150.00 0.00
5.				our residence, such as ho	me equity loans	5.	·	0.00

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Debtor 1 Debtor 2	Jeffrey Lowicki Kerry Lowicki	Case number (if known)			
			·		
6. Utili t		6.5	¢	200.00	
6a. 6b.	Electricity, heat, natural gas Water, sewer, garbage collection	6a. 6b.	· <u> </u>	200.00 127.00	
6c.	Telephone, cell phone, Internet, satellite, and cable services			127.00 568.00	
ьс. 6d.		6c. 6d.	·		
	Other. Specify:	_ ^{60.} 7.	· <u> </u>	0.00	
	lcare and children's education costs	7. 8.	\$	750.00 0.00	
_	ning, laundry, and dry cleaning	o. 9.	•	100.00	
	onal care products and services	9. 10.	· <u> </u>	150.00	
	cal and dental expenses	11.	·	175.00	
	sportation. Include gas, maintenance, bus or train fare.	11.	Ψ	175.00	
	ot include car payments.	12.	\$	400.00	
	rtainment, clubs, recreation, newspapers, magazines, and books	13.	\$	200.00	
	itable contributions and religious donations	14.	· <u> </u>	0.00	
5. Insu	•		<u> </u>	0.00	
	ot include insurance deducted from your pay or included in lines 4 or 20.				
	Life insurance	15a.	\$	0.00	
15b.	Health insurance	15b.	\$	0.00	
15c.	Vehicle insurance	15c.	\$	230.00	
15d.	Other insurance. Specify:	15d.	\$	0.00	
6. Taxe	s. Do not include taxes deducted from your pay or included in lines 4 or 20.				
Spec	ify:	16.	\$	0.00	
	Ilment or lease payments:				
	Car payments for Vehicle 1	17a.	·	0.00	
	Car payments for Vehicle 2	17b.	·	0.00	
	Other. Specify:	17c.	*	0.00	
	Other. Specify:	17d.	\$	0.00	
	payments of alimony, maintenance, and support that you did not report as	10	c	0.00	
	cted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	·		
	r payments you make to support others who do not live with you.	40	\$	0.00	
Spec	r real property expenses not included in lines 4 or 5 of this form or on <i>Sched</i> .	19.	/		
	Mortgages on other property	uie i: 10 20a.		0.00	
	Real estate taxes	20b.		0.00	
	Property, homeowner's, or renter's insurance	20c.		0.00	
	Maintenance, repair, and upkeep expenses	20d.	·	0.00	
	Homeowner's association or condominium dues	20a.	·	0.00	
		20e. 21.	·		
	r: Specify: Miscellaneous Expenses	_ 21.		250.00	
Pet	Care Expenses	_	+\$	150.00	
2. Calc	ulate your monthly expenses				
22a.	Add lines 4 through 21.		\$	3,450.00	
22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	<u> </u>	
22c.	Add line 22a and 22b. The result is your monthly expenses.		\$	3,450.00	
				5,100.00	
	ulate your monthly net income.		_		
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	·	6,487.66	
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	3,450.00	
00 -	College at the contract of the				
23c.	Subtract your monthly expenses from your monthly income.	23c.	\$	3,037.66	
	The result is your monthly net income.	200.	T	-,	
For e	ou expect an increase or decrease in your expenses within the year after you cample, do you expect to finish paying for your car loan within the year or do you expect your mication to the terms of your mortgage?			or decrease because of a	

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man to date to the						
	rmation to identify your	case:				
Debtor 1	Jeffrey Lowicki First Name	Middle News		None		
Debtor 2		Middle Name	Las	Name		
(Spouse if, filing)	Kerry Lowicki First Name	Middle Name	Las	Name		
United States B	Sankruptcy Court for the:	WESTERN DISTRICT (OF PENNSY	LVANIA		
Case number						
(if known)					☐ Check if this	s is an
					amended fil	ing
o =	4005					
Official For						
Declara	tion About a	ın Individual	Debte	or's Schedu	les	12/15
obtaining mone years, or both.	ey or property by fraud i 18 U.S.C. §§ 152, 1341, 1	n connection with a bank			false statement, concealing proto \$250,000, or imprisonment for	
Sig	gn Below					
Did you pa	ay or agree to pay some	one who is NOT an attor	ney to help	you fill out bankruptcy	forms?	
■ No						
☐ Yes.	Name of person				Attach Bankruptcy Petition Prepare	er's Notice,
	·			-	Declaration, and Signature (Officia	I Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sum	mary and s	chedules filed with this	declaration and	
•						
	ffrey Lowicki		X	/s/ Kerry Lowicki		
	ey Lowicki ure of Debtor 1			Kerry Lowicki Signature of Debtor 2		
Signati	uic oi Debioi i			Organization of Debitor 2		
Date	November 1, 2018			Date November 1	2018	

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-811	in this inform	nation to identify you				
	tor 1		case.			
Den	itor i	Jeffrey Lowicki First Name	Middle Name	Last Name		
	tor 2	Kerry Lowicki				
(Spo	use if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Ba	nkruptcy Court for the:	WESTERN DISTRICT OF	PENNSYLVANIA		
Cas (if kno	e number _				_	Check if this is an mended filing
Sta Be a	s complete a	of Financial	ble. If two married people a		ankruptcy equally responsible for sup	
num	ber (if know	n). Answer every ques			, , , , ,	
Par	Give D	Details About Your Ma	rital Status and Where You	Lived Before		
1.	What is you	r current marital statu	s?			
	☐ Married■ Not mai					
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	at all of the places you li	ived in the last 3 years. Do no	ot include where you live now	<i>ı</i> .	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory ico, Texas, Washington and W	
	■ No □ Yes. Ma	ake sure you fill out <i>Sch</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Part	Explai	n the Sources of You	r Income			
	Fill in the total	al amount of income yo	u received from all jobs and a	ng a business during this yeall businesses, including parter together, list it only once ur		ndar years?
	□ No ■ Yes. Fil	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$66,667.00	☐ Wages, commissions, bonuses, tips	\$0.00
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Jeffrey Lowicki Debtor 1 Debtor 2 **Kerry Lowicki** Case number (if known) Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$72,850.00 \$0.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2017) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business \$0.00 For the calendar year before that: \$68,750.00 ☐ Wages, commissions, Wages, commissions. (January 1 to December 31, 2016) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) From January 1 of current year until **Social Security** \$12,310.00 the date you filed for bankruptcy: **Benefits** For last calendar year: Social Security \$14,772.00 (January 1 to December 31, 2017) **Benefits** For the calendar year before that: Social Security \$14,772.00 (January 1 to December 31, 2016) **Benefits** Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? □ No. ☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

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	or 2 Kerry Lowicki		Case	e number (if known)	-	
1	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pay	ment for
li o a	Within 1 year before you filed for bankruptonsiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 1 slimony.	rtners; relatives of any gen control, or owner of 20% o	eral partners; partne r more of their voting	rships of which yo securities; and ar	u are a general ny managing ag	partner; corporation ent, including one fo
I	■ No □ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for the	nis payment
ii Ir	Vithin 1 year before you filed for bankruptonsider? nclude payments on debts guaranteed or cos No		ments or transfer a	ny property on a	ccount of a del	ot that benefited ar
	Yes. List all payments to an insider Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for the	his payment
			paid	still owe	Include credit	or's name
n E	ist all such matters, including personal injury nodifications, and contract disputes. No Yes. Fill in the details. Case title Case number	Nature of the case	Court or agency	i suits, paternity a	Status of the	ŕ
	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.	v.	erty repossessed, fo		hed, attached,	
	Creditor Name and Address	Describe the Property		Date		Value of the property
	Vithin 90 days before you filed for bankrup			ancial institution	, set off any an	nounts from your
a I	accounts or refuse to make a payment bec. No Yes. Fill in the details.	ause you owed a debt?				
a I	No	ause you owed a debt? Describe the action the	creditor took	Date a	action was	Amount
a ■ □	■ No □ Yes. Fill in the details.	Describe the action the		taken		Amount

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		/ Lowicki Lowicki		Case number (if known)					
Par	t 5: List Cert	tain Gifts and Contribution	ıs						
13.	■ No	before you filed for bankr the details for each gift.	uptcy, c	did you give any gifts with a total value of more t	han \$600 per personî	?			
	per person	otal value of more than \$60 nom You Gave the Gift and		Describe the gifts	Dates you gave the gifts	Value			
14.	Address: Within 2 years No	before you filed for bankr	ruptcy, c	lid you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?			
	☐ Yes. Fill in	the details for each gift or o	ontributi	ion.					
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)			Describe what you contributed	Dates you contributed	Value			
Par	t 6: List Cert	tain Losses							
	Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details.								
	Describe the property you lost and how the loss occurred Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.		Date of your loss	Value of property lost					
Par	t 7: List Cert	tain Payments or Transfer	s						
	Within 1 year I consulted abo Include any atto	pefore you filed for bankru out seeking bankruptcy or	ıptcy, di preparir	d you or anyone else acting on your behalf pay on a bankruptcy petition? s, or credit counseling agencies for services required		rty to anyone you			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You		Description and value of any property transferred	Date payment or transfer was made	Amount of payment				
		gal Holdings, LLC ill Run Blvd. PA 15210		costs \$500.00 fees \$1,500.00	October 31, 2018	\$0.00			
	promised to he Do not include	elp you deal with your creany payment or transfer tha	ditors o	d you or anyone else acting on your behalf pay or to make payments to your creditors? ed on line 16.	or transfer any prope	rty to anyone who			
		the details.							
	Person Who N Address	Was Paid		Description and value of any property transferred	Date payment or transfer was	Amount of payment			

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Jeffrey Lowicki Debtor 1 Debtor 2 Kerry Lowicki

Case number (if known)

18.	Within 2 years before you filed for bankrupt transferred in the ordinary course of your be include both outright transfers and transfers minclude gifts and transfers that you have alread No	ousiness or financial affa ade as security (such as t	airs? the granting of a							
	☐ Yes. Fill in the details.									
	Person Who Received Transfer Address	Description and very property transfer		payme	ibe any property or ents received or debts n exchange	Date transfer was made				
	Person's relationship to you				J					
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro		y property to a	self-settle	d trust or similar device	of which you are a				
	No☐ Yes. Fill in the details.									
	Name of trust	Description and v	alue of the pro	perty trans	ferred	Date Transfer was made				
Dor	4 9. List of Cortain Financial Associate In	atrumento. Safa Danasia	t Davas and Ct	tarana Unit	-	mude				
Par	t 8: List of Certain Financial Accounts, In	struments, sale Deposit	i boxes, and Si	torage Unit	5					
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred?	•								
	Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.									
	■ No □ Yes. Fill in the details.									
			_		_					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)			unt or Date account was closed, sold, moved, or transferred		Last balance before closing or transfer				
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?									
	■ No □ Yes. Fill in the details.									
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)			Describe	the contents	Do you still have it?				
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?									
	■ No □ Yes. Fill in the details.									
		Who also has as I		Deceribe	the contents	De veu etill				
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)			the contents	Do you still have it?				
Par	t 9: Identify Property You Hold or Control	for Someone Else								
23.	Do you hold or control any property that so for someone.	meone else owns? Incli	ude any proper	ty you borr	owed from, are storing f	or, or hold in trust				
	■ No									
	Yes. Fill in the details.			_						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value				
Par	t 10: Give Details About Environmental Infe	ormation								
For	the purpose of Part 10, the following definiti	ons apply:								

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

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toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

Jeffrey Lowicki Debtor 1 Debtor 2 Kerry Lowicki

Case number (if known)

	reg	diations controlling the cleanup of these	substances, wastes, or material.						
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.								
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.								
Rep	ort a	II notices, releases, and proceedings th	at you know about, regardless of when	the	y occurred.				
24.	Has	any governmental unit notified you tha	you may be liable or potentially liable	und	ler or in violation of an environm	ental law?			
		No Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	i	Environmental law, if you know it	Date of notice			
25.	Hav	e you notified any governmental unit of	any release of hazardous material?						
		No Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	i	Environmental law, if you know it	Date of notice			
26.	Hav	e you been a party in any judicial or adr	ninistrative proceeding under any envi	ronn	nental law? Include settlements a	and orders.			
		No							
		Yes. Fill in the details.							
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ture of the case	Status of the case			
Par	t 11:	Give Details About Your Business or	Connections to Any Business						
27.	Witl	nin 4 years before you filed for bankrupt	cy, did you own a business or have an	y of	the following connections to any	/ business?			
		☐ A sole proprietor or self-employed i	n a trade, profession, or other activity,	eith	er full-time or part-time				
		☐ A member of a limited liability comp	any (LLC) or limited liability partnershi	ip (L	LP)				
		☐ A partner in a partnership							
		☐ An officer, director, or managing ex	ecutive of a corporation						
		☐ An owner of at least 5% of the votin	g or equity securities of a corporation						
		No. None of the above applies. Go to F	Part 12.						
		Yes. Check all that apply above and fill	in the details below for each business	i.					
		siness Name	Describe the nature of the business		Employer Identification numbe				
		dress mber, Street, City, State and ZIP Code)	Do not include Social Security Dates business existed	number or IIIN.					
28.		nin 2 years before you filed for bankrupt itutions, creditors, or other parties.	cy, did you give a financial statement t	o an	nyone about your business? Inclu	ude all financial			
		No							
		Yes. Fill in the details below.							
		me dress mber, Street, City, State and ZIP Code)	Date Issued						
_		-							

Part 12: Sign Below

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Debtor 1	Jeffrey Lowicki								
Debtor 2	Kerry Lowicki	Case number (if known)							
with a bar		ng a false statement, concealing property, or obtaining money or property by fraud in connection p to \$250,000, or imprisonment for up to 20 years, or both.							
/s/ Jeffr	ey Lowicki	/s/ Kerry Lowicki							
Jeffrey	Lowicki	Kerry Lowicki							
Signatur	e of Debtor 1	Signature of Debtor 2							
Date N	lovember 1, 2018	Date November 1, 2018							
_ •	ttach additional pages to Your Sta	tement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?							
■ No									
☐ Yes									
_ ' '	ay or agree to pay someone who	s not an attorney to help you fill out bankruptcy forms?							
■ No									
☐ Yes. N	ame of Person Attach the B	ankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).							

Fill in this information to identify your case:						
Debtor 1	Jeffrey Lowicki					
Debtor 2 Kerry Lowicki (Spouse, if filing)						
United States Bankruptcy Court for the: Western District of Pennsylvania						
Case number (if known)						

Check as directed in lines 17 and 21:								
According to the calculations required by this Statement:								
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).							
•	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).							
	3. The commitment period is 3 years.							
	4. The commitment period is 5 years.							

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income 1. What is your marital and filing status? Check one only. ☐ Not married. Fill out Column A, lines 2-11. ■ Married. Fill out both Columns A and B. lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 0.00 7,448.32 payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments 0.00 0.00 you listed on line 3. 5. Net income from operating a business, Debtor 1 profession, or farm \$ 0.00 Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from a business, profession, or farm \$ 6. Net income from rental and other real property Debtor 1 0.00 \$ Gross receipts (before all deductions) -\$ 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 \$ Net monthly income from rental or other real property

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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ebtor ebtor	1	rey Lowicki ry Lowicki			Case numb	er (<i>if known</i>)		
					Column A Debtor 1		Column B Debtor 2 o	or
7.	Interest.	dividends, and royalties			\$	0.00	\$	0.00
		yment compensation			\$	0.00	\$	0.00
	Do not en	iter the amount if you contend I Security Act. Instead, list it he	that the amount received vere:	vas a benefit under	· 		·	
	For you	J	\$	0.00				
		ır spouse		0.00				
	Pension	or retirement income. Do not not the Social Security Act.		ved that was a	\$	0.00	\$	0.00
	Do not increceived	rom all other sources not list clude any benefits received und as a victim of a war crime, a cri terrorism. If necessary, list oth w.	der the Social Security Act me against humanity, or in	or payments nternational or				
	_				\$	0.00	\$	0.00
	_				\$	0.00	\$	0.00
		Total amounts from separate pa	ages, if any.	+	\$	0.00	\$	0.00
		e your total average monthly mn. Then add the total for Col			7,448.32	+ \$ _	0.00	7,448.32 Total average
12.	Сору уог	etermine How to Measure Your total average monthly inco	ome from line 11.					\$ 7,448.32
		are not married. Fill in 0 below						
	■ You	are married and your spouse is	s filing with you. Fill in 0 be	elow.				
	_	are married and your spouse is						
	Fill i	n the amount of the income list endents, such as payment of the	ed in line 11, Column B, th					
	adju	w, specify the basis for excludi stments on a separate page.	·	nount of income dev	voted to eac	h purpose	. If necessary	/, list additional
	If thi	s adjustment does not apply, e	nter 0 below.	\$				
				\$				
				+\$				
		Total		\$	0.0	00 Co	ppy here=>	- 0.00
14.	Your cu	rrent monthly income. Subtr	act line 13 from line 12.					\$
15.	Calcula	te your current monthly inco	me for the year. Follow the	hese steps:				
	15a. C	opy line 14 here=>						\$7,448.32
	М	ultiply line 15a by 12 (the numl						x 12
	15b. Th	ne result is your current monthl	y income for the year for the	his part of the form.				\$89,379.84

Jeffrey Lowicki

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Debt	tor 2	Kerry Lowicki		Case number (if known)		
16	S. Cal	culate the median family income that applies to y	you. Follow these	steps:		
	16a	. Fill in the state in which you live.	PA	_		
	16b	. Fill in the number of people in your household.	2			
		Fill in the median family income for your state and		_	\$	65,060.00
		To find a list of applicable median income amounts instructions for this form. This list may also be available.	s, go online using t	the link specified in the separate	Ψ_	
17	7. Hov	v do the lines compare?				
	17a	. ☐ Line 15b is less than or equal to line 16c. C 11 U.S.C. § 1325(b)(3). Go to Part 3. Do N				
	17b	Line 15b is more than line 16c. On the top 1325(b)(3). Go to Part 3 and fill out Calcu your current monthly income from line 14 a	ulation of Your Di	•		-
Par	rt 3:	Calculate Your Commitment Period Under 11	U.S.C. § 1325(b)(4)		
18.	Cop	by your total average monthly income from line 1	1.		\$	7,448.32
19.	con	luct the marital adjustment if it applies. If you are tend that calculating the commitment period under 1 use's income, copy the amount from line 13.				
	19a	. If the marital adjustment does not apply, fill in 0 on	line 19a.		-\$	0.00
	19b	. Subtract line 19a from line 18.			\$	7,448.32
20.	Cal	culate your current monthly income for the year.	Follow these step	os:		
	20a	. Copy line 19b			\$_	7,448.32
		Multiply by 12 (the number of months in a year).				x 12
	20b	. The result is your current monthly income for the y	ear for this part of	the form	\$_	89,379.84
	20c	. Copy the median family income for your state and	size of household	from line 16c	\$_	65,060.00
	21.	How do the lines compare?				
		☐ Line 20b is less than line 20c. Unless otherwing period is 3 years. Go to Part 4.	se ordered by the	court, on the top of page 1 of this form, ch	neck box 3,	The commitment
		Line 20b is more than or equal to line 20c. Un commitment period is 5 years. Go to Part 4.	nless otherwise ord	dered by the court, on the top of page 1 of	this form, c	heck box 4, The
Par	rt 4:	Sign Below				
	By s	signing here, under penalty of perjury I declare that t	the information on	this statement and in any attachments is	true and cor	rect.
2	X /s/	/ Jeffrey Lowicki)	ζ /s/ Kerry Lowicki		
		effrey Lowicki gnature of Debtor 1		Kerry Lowicki Signature of Debtor 2		
	•	November 1, 2018		Date November 1, 2018		
	I£	MM / DD / YYYY		MM/DD/YYYY		
		ou checked 17a, do NOT fill out or file Form 122C-2. ou checked 17b, fill out Form 122C-2 and file it with the		RQ of that form, convivour current monthly	income from	n line 14 abovo
	ıı yc	A SHOOKGA 17D, IIII OULT OITH 1220-2 AND INC IL WILL!		o or macronni, oopy your ountill indilling		17 00000.

Jeffrey Lowicki

Debtor 1

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Fill in	this info	rmation to ide	entify your case	:							
Debto	r 1	Jeffrey Low	vicki								
Debto	r 2	Kerry Lowi	cki								
(Spou	se, if filin					_					
United	l States E	Bankruptcy Cou	rt for the: West	ern District of P	ennsylvania						
Case (if kno	number wn)							☐ Chec	k if this is	an amende	ed filing
	l Form 1										
Cha	pter	13 Calcı	ulation of	Your Di	sposable	e In	come				04/1
			need your comp Form 122C-1).	leted copy of (Chapter 13 Sta	atemen	nt of Your Curr	ent Monthly	/ Income a	nd Calculat	ion of
space	is neede	d, attach a se _l	e as possible. If t parate sheet to t name and case r	his form, Inclu	de the line nur						
Part 1	: Ca	lculate Your D	eductions from	Your Income							
the	question	ns in lines 6-15	vice (IRS) issues 5. To find the IRS vailable at the b	S standards, go	o online using						
exp	enses if t	hey are higher	ts set out in lines than the standard any amounts tha	ds. Do not inclu	de any operatin	ng expe	enses that you s	subtracted fr	om income		
If yo	our exper	ses differ from	month to month,	enter the avera	ige expense.						
Not	e: Line n	umbers 1-4 are	not used in this f	orm. These nur	mbers apply to i	informa	ation required b	y a similar fo	orm used in	chapter 7 c	ases.
5.	The nu	mber of peopl	e used in detern	nining your de	ductions from	incom	ne				
	plus the	number of any	eople who could by additional deper	ndents whom yo						2	
Nat	ional Sta	ındards	You must use	the IRS Nationa	al Standards to	answe	er the questions	in lines 6-7			
6.			other items: Usin ollar amount for fo			ntered i	in line 5 and the	e IRS Nation	al	\$	1,202.00
7.	the dollar	ar amount for o who are 65 or o	care allowance: out-of-pocket heal olderbecause old mount, you may d	th care. The nu der people have	mber of people e a higher IRS a	is split allowar	t into two catego nce for health ca	oriespeople	e who are ι	ınder 65 and	l

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Jeffrey Lowicki Debtor 1 **Kerry Lowicki** Case number (if known) Debtor 2 People who are under 65 years of age 7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65 2 7c. Subtotal. Multiply line 7a by line 7b. 104.00 Copy here=> \$ People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person 114 7e. Number of people who are 65 or older 0 7f. Subtotal. Multiply line 7d by line 7e. 0.00 Copy here=> \$ 0.00 104.00 7g. **Total.** Add line 7c and line 7f 104.00 Copy total here=> Local Standards You must use the IRS Local Standards to answer the guestions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill 590.00 in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount 990.00 listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Name of the creditor Average monthly payment **Ditech Financial LIc** 797.00 Сору Repeat this amount 797.00 797.00 9b. Total average monthly payment here=> on line 33a. 9c. Net mortgage or rent expense. Copy Subtract line 9b (total average monthly payment) from line 9a (mortgage 193.00 193.00 or rent expense). If this number is less than \$0, enter \$0. here=> 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and 0.00 affects the calculation of your monthly expenses, fill in any additional amount you claim. Explain why:

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Debtor 1 Debtor 2	Jeffrey Lowicki Kerry Lowicki		Case number (if know	wn)		
11.	Local transportation expenses: Check the number of veh	icles for which you claim	an ownership or	operating e	xpense.	
	☐ 0. Go to line 14.					
	☐ 1. Go to line 12.					
	■ 2 or more. Go to line 12.					
12.	Vehicle operation expense: Using the IRS Local Standard operating expenses, fill in the <i>Operating Costs</i> that apply for				\$	460.00
13.	Vehicle ownership or lease expense: Using the IRS Loca You may not claim the expense if you do not make any loan more than two vehicles.					
Ve	hicle 1 Describe Vehicle 1:					
13a.	Ownership or leasing costs using IRS Local Standard		. \$	0.00		
13b.	Average monthly payment for all debts secured by Vehicle 100 not include costs for leased vehicles.	1.				
	To calculate the average monthly payment here and on line are contractually due to each secured creditor in the 60 mor bankruptcy. Then divide by 60.		at			
	Name of each creditor for Vehicle 1	Average monthly payment				
	-NONE-	\$\$				
	Total Average Monthly Payment	\$0.00	Copy here => -\$	0.0	Repeat this amount on line 33b.	
13c.	Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this number is less than \$6	0, enter \$0	\$	0.00	Copy net /ehicle 1 expense here => \$	0.00
Ve	hicle 2 Describe Vehicle 2:					
13d.	Ownership or leasing costs using IRS Local Standard		. \$	0.00		
13e.	Average monthly payment for all debts secured by Vehicle 2 leased vehicles.	2. Do not include costs fo	or			
	Name of each creditor for Vehicle 2	Average monthly payment				
	-NONE-	\$				
	Total average monthly payment	\$0.00	Copy here => -\$	0.00	Repeat this amount on line 33c.	
13f.	Net Vehicle 2 ownership or lease expense		_		Copy net	
	Subtract line 13e from line 13d. if this number is less than \$6	0, enter \$0	\$ 	0.00	/ehicle 2 expense here => \$	0.00
14.	Public transportation expense: If you claimed 0 vehicles Public Transportation expense allowance regardless of				he \$	0.00
15.	Additional public transportation expense: If you claimed also deduct a public transportation expense, you may fill in a not claim more than the IRS Local Standard for <i>Public Trans</i> .	what you believe is the a				0.00

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Debtor 1 Debtor 2 **Jeffrey Lowicki** Case number (*if known*)

Oth	er Necess		n addition to the expense of the following IRS categories		ns listed above,	you are allowed your monthly expenses	s for	
16.	self-emplo your pay f and subtra	oyment taxes, sociator these taxes. How	al security taxes, and Medic wever, if you expect to rece m the total monthly amount	are taxe ive a tax	s. You may inc refund, you m	d local taxes, such as income taxes, clude the monthly amount withheld from ust divide the expected refund by 12 for taxes.	\$	1,795.87
17		•	e total monthly payroll ded	uctions t	hat vour iob red	quires, such as retirement		
		ons, union dues, ar			nat your job ro	quires, such as remement		50.4 7
	Do not inc	clude amounts that	are not required by your join	o, such a	as voluntary 40	1(k) contributions or payroll savings.	\$	58.47
18.	filing toge Do not inc	ther, include payme	ents that you make for your life insurance on your depe	spouse'	s term life insu	e insurance. If two married people are rance. spouse's life insurance, or for any form	\$	199.64
19.			The total monthly amount that spousal or child support			by the order of a court or		
	Do not inc	clude payments on	past due obligations for spo	ousal or	child support.	You will list these obligations in line 35.	\$	0.00
20.	0. Education: The total monthly amount that you pay for education that is either required:							
	as a co	ondition for your job	o, or					
	for you	ır physically or mer	itally challenged dependent	t child if i	no public educa	ation is available for similar services.	\$	0.00
21.	Childcare Do not inc	sitting, daycare, nursery, and preschool.	\$	0.00				
22.	Additional that is required by a healt		0.00					
	Payments for health insurance or health savings accounts should be listed only in line 25.							
23.	23. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment							
	expenses	+\$_	200.00					
24.	24. Add all of the expenses allowed under the IRS expense allowances. Add lines 6 through 23.							4,802.98
Add	Additional Expense Deductions These are additional deductions allowed by the Means Test. Note: Do not include any expense allowances listed in lines 6-24.							
25.		, disability insurand				ses. The monthly expenses for health ly necessary for yourself, your spouse, c	or	
	Health ins	surance		\$	65.00			
	Disability	insurance		\$	124.80			
	Health sa	vings account	-	- \$	0.00			
	Total			\$	189.80	Copy total here=>	\$	189.80
		ctually spend this to o. How much do yo				-		
	■ Ye	es		\$				
26.	continue t	to pay for the reaso sehold or member o	nable and necessary care	and supp o is unal	oort of an elder ble to pay for s	e actual monthly expenses that you will ly, chronically ill, or disabled member of uch expenses. These expenses may 29A(b)	\$	0.00
27.						nses that you incur to maintain the es Act or other federal laws that apply.		
	By law, the court must keep the nature of these expenses confidential.						\$	0.00

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Iline If you 8, t You am 29. Edd \$16 put You clai * S 30. Add high tha To inst You	then fill in the excess amount of home en unust give your case trustee document about claimed is reasonable and necessary unust give your case trustee document about claimed is reasonable and necessary ucation expenses for dependent child 60.42* per child) that you pay for your deblic elementary or secondary school. In unust give your case trustee document imed is reasonable and necessary and resulting to adjustment on 4/01/19, and ever dittional food and clothing expense. To ther than the combined food and clothing allowance in 5% of the food and clothing allowance.	ation of your actual expenses, and you mustary. Iren who are younger than 18. The month pendent children who are younger than 18 ation of your actual expenses, and you must already accounted for in lines 6-23. Iren 3 years after that for cases begun on or the monthly amount by which your actual for allowances in the IRS National Standards.	ests included in expenses of t show that the additional ly expenses (not more that years old to attend a prival t explain why the amount after the date of adjustmen	on line n te or	\$	0.00	
8, the You amm 29. Edd \$16 put You claim * \$ 30. Add high that You instruction You will be a second to the You will be a second to the You will be a second to the You am a second to t	then fill in the excess amount of home er u must give your case trustee document tount claimed is reasonable and necessary ucation expenses for dependent child 60.42* per child) that you pay for your deblic elementary or secondary school. In u must give your case trustee document imed is reasonable and necessary and resulting to adjustment on 4/01/19, and ever than the combined food and clothing allowance in 5% of the food and clothing allowance	nergy costs ation of your actual expenses, and you mustury. Iren who are younger than 18. The month opendent children who are younger than 18 ation of your actual expenses, and you must already accounted for in lines 6-23. Iren 3 years after that for cases begun on or the monthly amount by which your actual for allowances in the IRS National Standards.	t show that the additional ly expenses (not more that years old to attend a privat t explain why the amount after the date of adjustmen	n te or	· —	0.00	
am 29. Edi \$16 pub You clai * \$ 30. Add high tha To inst You	count claimed is reasonable and necessary ucation expenses for dependent child 60.42* per child) that you pay for your deblic elementary or secondary school. In which we will be used to be a secondary school of the seconda	Iren who are younger than 18. The month pendent children who are younger than 18 ation of your actual expenses, and you must already accounted for in lines 6-23. Early 3 years after that for cases begun on or the monthly amount by which your actual for allowances in the IRS National Standards.	ly expenses (not more that years old to attend a privar texplain why the amount after the date of adjustments	te or	· —	0.00	
\$16 pub You clai * S 30. Add high tha To inst	60.42* per child) that you pay for your deblic elementary or secondary school. u must give your case trustee document imed is reasonable and necessary and roubject to adjustment on 4/01/19, and evolutional food and clothing expense. The than the combined food and clothing an 5% of the food and clothing allowance	pendent children who are younger than 18 ation of your actual expenses, and you must already accounted for in lines 6-23. Ery 3 years after that for cases begun on or the monthly amount by which your actual for allowances in the IRS National Standards.	years old to attend a prival t explain why the amount after the date of adjustmen	te or	•		
clai * S 30. Add hig tha To inst You	imed is reasonable and necessary and r subject to adjustment on 4/01/19, and even ditional food and clothing expense. T wher than the combined food and clothing an 5% of the food and clothing allowance	not already accounted for in lines 6-23. Bery 3 years after that for cases begun on or the monthly amount by which your actual for allowances in the IRS National Standards.	after the date of adjustmer	nt.	Φ.		
30. Adhightha To inst	Iditional food and clothing expense. The than the combined food and clothing in 5% of the food and clothing allowance	he monthly amount by which your actual for allowances in the IRS National Standards.	•	nt.	Φ.		
hig tha To inst You	ther than the combined food and clothing in 5% of the food and clothing allowance	allowances in the IRS National Standards.			\$	0.0	
inst You	find a chart showing the maximum addit	o in the intervational Standards.	od and clothing expenses a That amount cannot be m	are iore			
		ional allowance, go online using the link spe so be available at the bankruptcy clerk's offi					
	u must show that the additional amount	claimed is reasonable and necessary.			\$	0.0	
	Continuing charitable contributions. The amount that you will continue to contribute in the form of cash or financial instruments to a religious or charitable organization. 11 U.S.C. § 548(d)(3) and (4).						
Do	not include any amount more than 15%	of your gross monthly income.			\$	0.0	
	ld all of the additional expense deduct d lines 25 through 31.	ions.			\$	189.80	
Deducti	ions for Debt Payment						
To c cred	ns, and other secured debt, fill in lines calculate the total average monthly paym litor in the 60 months after you file for ba Mortgages on your home	ent, add all amounts that are contractually o	lue to each secured			e monthly	
33a. (Copy line 9b here			=>	paymen \$	797.00	
					Ψ	191.00	
	Loans on your first two vehicles				•		
				=>	\$	0.00	
3c. (Copy line 13e here			=>	\$	0.00	
3d. L	List other secured debts:						
Name of	f each creditor for other secured debt	Identify property that secures the debt	Does payme include taxe or insurance	S			
			□ No				
-N	NONE-		☐ Yes		Φ.		
_					\$		
			□ No				
			☐ Yes		\$		
			□ No □ Yes	+	¢		
_				1	—		
	otal average monthly payment. Add lines	220 through 22d	\$ 797.00	Copy total	\$	797.00	

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Jeffrey Lowicki Debtor 1 **Kerry Lowicki** Debtor 2 Case number (if known) 34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? ☐ No. Go to line 35. Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the cure amount). Next, divide by 60 and fill in the information below. Name of the creditor Identify property that secures the debt **Total cure amount** Monthly cure amount 243 Camfield Street Pittsburgh, PA 15210 Allegheny County Residence Fair Market Value Determined By **25,000.00** ÷ 60 = \$ **Ditech Financial LIc** 416.67 Comparable Sales \$ $\div 60 = $$ \$ $\div 60 = +$ \$ Copy total 416.67 416.67 \$ Total here=> 35. Do you owe any priority claims - such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507. ■ No. Go to line 36. Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims 0.00 ÷60 \$ 0.00 36. Projected monthly Chapter 13 plan payment 1,699.00 Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by 4.40 the Executive Office for United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. Copy total 74.76 74.76 Average monthly administrative expense here=> 1,288.43 37. Add all of the deductions for debt payment. Add lines 33e through 36. **Total Deductions from Income** 38. Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS 4,802.98 expense allowances Copy line 32, All of the additional expense deductions 189.80 Copy line 37, All of the deductions for debt payment 1,288.43 6,281.21 6.281.21 Total deductions..... Copy total here=>

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Debtor 1 Debtor 2	Kerry Lowicki	ı			C	case r	numb	per (if known)		
Part 2:	Determine You	r Disposable Income Under 11 U.S.	C. § 132	25(b)	(2)					
		ent monthly income from line 14 of				d.			\$	7,448.32
c l di re	D. Fill in any reasonably necessary income you receive for support for dependent children. The monthly average of any child support payments, foster care payments disability payments for a dependent child, reported in Part I of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably necessary to be expended for such child.							Q	0.00	
eı in	. Fill in all qualified retirement deductions. The monthly total of all amounts that you employer withheld from wages as contributions for qualified retirement plans, as specin 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, a specified in 11 U.S.C. § 362(b)(19).							0	0.00	
42. T o	Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 here							6,281	.21	
e: th	xpenses and you ha neir expenses. You r	al circumstances. If special circumst ve no reasonable alternative, describ nust give your case trustee a detailed ocumentation for the expenses.	e the sp	ecial	circumstances a	and				
Desc	ribe the special cir	cumstances			Amount of ex	pen	se			
				_	.					
				\$						
					§					
			Total	\$_	0.00		Cop	oy e=> \$	0.00	
44. T	otal adjustments. A	Add lines 40 through 43.			=>	\$_	_	6,281.21	Copy here=> -\$	6,281.21
	•	thly disposable income under § 132	25(b)(2).	Sub	tract line 44 from	n line	э 39).	\$	1,167.11
Part 3:	Change in Inco	ome or Expenses								
ha tir yo	ave changed or are me your case will be out filed your petition	r expenses. If the income in Form 12 virtually certain to change after the date open, fill in the information below. For the change 122C-1 in the first column, en n when the increase occurred, and fill	ate you f or examp ter line 2	iled y ble, if 2 in tl	our bankruptcy the wages repo ne second colum	petit rted nn, e	tion incı	and during the reased after		
Form	Line	Reason for change			Date of chang	ge		Increase or decrease?	Amount o	f change
☐ 12: ☐ 12: ☐ 12: ☐ 12: ☐ 12: ☐ 12: ☐ 12:	2C-2 2C-1 2C-2 2C-1 2C-2						_	☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Increase ☐ Increase ☐ Decrease ☐ Increase	\$ \$	

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Debtor 1 Debtor 2	Jeffrey Lowicki Kerry Lowicki	_	Case number (if known)
Part 4:	Sign Below		
	By signing here, under penalty of perjury you declare that the inform		,
X	/s/ Jeffrey Lowicki Jeffrey Lowicki Signature of Debtor 1	Х	/s/ Kerry Lowicki Kerry Lowicki Signature of Debtor 2
Date	MM / DD / YYYY	Date	November 1, 2018 MM / DD / YYYY

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Debtor 1	Jeffrey Lowicki		
Debtor 2	Kerry Lowicki	Case number (if known)	

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period **05/01/2018** to **10/31/2018**.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Giant Eagle

Year-to-Date Income:

Starting Year-to-Date Income: \$34,285.79 from check dated 4/30/2018. Ending Year-to-Date Income: \$78,975.71 from check dated 10/31/2018.

Income for six-month period (Ending-Starting): \$44,689.92.

Average Monthly Income: \$7,448.32 .

Non-CMI - Social Security Act Income

Source of Income: Social Security Benefits

Income by Month:

6 Months Ago:	05/2018	\$1,231.00
5 Months Ago:	06/2018	\$1,231.00
4 Months Ago:	07/2018	\$1,231.00
3 Months Ago:	08/2018	\$1,231.00
2 Months Ago:	09/2018	\$1,231.00
Last Month:	10/2018	\$1,231.00
	Average per month:	\$1,231.00

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
_	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 18-24273-CMB Doc 1 Filed 11/01/18 Entered 11/01/18 11:37:15 Desc Main Document Page 55 of 56

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Western District of Pennsylvania

T	Jeffrey Lowicki	•	C N-	
ın	n re Kerry Lowicki	Debtor(s)	Case No. Chapter	13
	DISCLOSURE OF COM	PENSATION OF ATTOI	RNEY FOR DE	EBTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. compensation paid to me within one year before the be rendered on behalf of the debtor(s) in contempla	e filing of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to
				4,000.00
	Prior to the filing of this statement I have rece	ived	\$	1,500.00
	Balance Due		\$	2,500.00
2.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
3.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
4.	■ I have not agreed to share the above-disclosed	compensation with any other person	unless they are mem	bers and associates of my law firm.
	☐ I have agreed to share the above-disclosed comcopy of the agreement, together with a list of the			
5.	In return for the above-disclosed fee, I have agreed	to render legal service for all aspect	s of the bankruptcy c	ase, including:
	 a. Analysis of the debtor's financial situation, and b. Preparation and filing of any petition, schedules c. Representation of the debtor at the meeting of c d. [Other provisions as needed] Negotiations with secured creditors reaffirmation agreements and applied 522(f)(2)(A) for avoidance of liens of 	s, statement of affairs and plan which reditors and confirmation hearing, and to reduce to market value; exceptions as needed; preparation	may be required; and any adjourned hea emption planning;	rings thereof;
6.	By agreement with the debtor(s), the above-disclos Representation of the debtors in an any other adversary proceeding.			es, relief from stay actions or
		CERTIFICATION		
thi	I certify that the foregoing is a complete statement is bankruptcy proceeding.	of any agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in
	November 1, 2018	/s/ Paul W. McElr	ath, Jr.	
	Date	Paul W. McElrath Signature of Attorne		
		McElrath Legal H	oldings, LLC	
		1641 Saw Mill Ru		
		Pittsburgh, PA 15 412-765-3606 Fa		
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		Name of law firm		

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United States Bankruptcy Court Western District of Pennsylvania

In re	Jeffrey Lowicki Kerry Lowicki		Case No.	
		Debtor(s)	Chapter	13
Γhe ab		TIFICATION OF CREDITOR that the attached list of creditors is true and		of their knowledge.
Date:	November 1, 2018	/s/ Jeffrey Lowicki Jeffrey Lowicki		
		Signature of Debtor		
Date:	November 1, 2018	/s/ Kerry Lowicki		
		Kerry Lowicki		

Signature of Debtor